

Attorney's Docket No.: 14083/004002

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant : Roger Proksch
 Serial No.: 10/683,546
 Filed : October 10, 2003
 Title : APPARATUS AND METHOD FOR ISOLATING AND MEASURING
 MOVEMENT IN METROLOGY APPARATUS

Mail Stop Amendment
 Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

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AMENDMENT

In response to the Office action mailed March, please amend
 the application as follows:

Amendments to the Specification begin on page 2 of this paper.

Amendments to the Claims begin on page 24 of this paper.

Remarks/Arguments begin on page 34 of this paper.

10/13/2004 TDWINKS 00000002 061050 10683546

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CERTIFICATE OF TRANSMISSION BY FACSIMILE

I hereby certify that this correspondence is being transmitted by
 facsimile to the Patent and Trademark Office on the date indicated
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Date of Transmission

September 27, 2004

Signature

Brenda Lewis
 Typed or Printed Name of Person Signing Certificate

Serial No.: 10/683,546

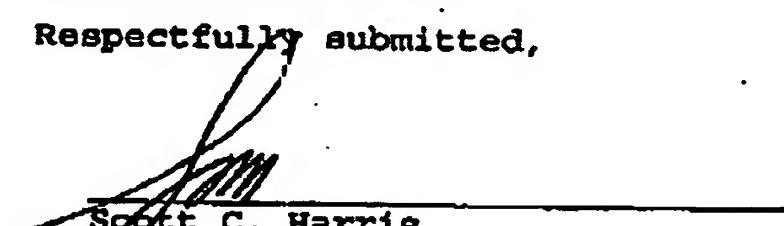
Attorney's Docket No.:14083/004002

It is believed that all of the pending claims have been addressed in this paper. However, failure to address a specific rejection, issue or comment, does not signify agreement with or concession of that rejection, issue or comment. In addition, because the arguments made above are not intended to be exhaustive, there may be reasons for patentability of any or all pending claims (or other claims) that have not been expressed. Finally, nothing in this paper should be construed as an intent to concede any issue with regard to any claim, except as specifically stated in this paper, and the amendment of any claim does not necessarily signify concession of unpatentability of the claim prior to its amendment.

In view of the above amendments and remarks, therefore, all of the claims should be in condition for allowance. A formal notice to that effect is respectfully solicited.

Please apply \$475.00 for the three month extension fee and any other charges or credits to Deposit Account No. 06-1050.

Respectfully submitted,



Scott C. Harris
Reg. No. 32,030

Date: September 27, 2004

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PATENT APPLICATION FEE DETERMINATION RECORD

Substitute for Form PTO-875

Application or Docket Number

10683546

CLAIMS AS FILED – PART I

(Column 1)

(Column 2)

FOR	NUMBER FILED	NUMBER EXTRA
BASIC FEE (37 CFR 1.16(a))		
TOTAL CLAIMS (37 CFR 1.16(c))	minus 20 =	
INDEPENDENT CLAIMS (37 CFR 1.16(b))	minus 3 =	
MULTIPLE DEPENDENT CLAIM PRESENT		(37 CFR 1.16(d))

* If the difference in column 1 is less than zero, enter "0" in column 2.

SMALL ENTITY

OR

RATE	FEES
	\$ _____
X \$ _____ =	
X \$ _____ =	
+ \$ _____ =	
TOTAL	

OTHER THAN SMALL ENTITY

RATE	FEES
	\$ _____
X \$ _____ =	
X \$ _____ =	
+ \$ _____ =	
TOTAL	

CLAIMS AS AMENDED – PART II

(Column 1)

(Column 2)

(Column 3)

AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total (37 CFR 1.16(c))	37	Minus	37	= _____
Independent (37 CFR 1.16(b))	5	Minus	5	= _____
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				(37 CFR 1.16(d))

SMALL ENTITY

OR

RATE	ADDI- TIONAL FEE
X \$ _____ =	
X \$ _____ =	
+ \$ _____ =	
TOTAL ADD'L FEE	

OTHER THAN SMALL ENTITY

RATE	ADDI- TIONAL FEE
X \$ _____ =	
X \$ _____ =	
+ \$ _____ =	
TOTAL ADD'L FEE	

(Column 1)

(Column 2)

(Column 3)

AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total (37 CFR 1.16(c))		Minus	**	= _____
Independent (37 CFR 1.16(b))		Minus	***	= _____
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				(37 CFR 1.16(d))

RATE
ADDITIONAL
FEE

X \$ _____ =	
X \$ _____ =	
+ \$ _____ =	
TOTAL ADD'L FEE	

RATE
ADDITIONAL
FEE

X \$ _____ =	
X \$ _____ =	
+ \$ _____ =	
TOTAL ADD'L FEE	

(Column 1)

(Column 2)

(Column 3)

AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total (37 CFR 1.16(c))		Minus	**	= _____
Independent (37 CFR 1.16(b))		Minus	***	= _____
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				(37 CFR 1.16(d))

RATE
ADDITIONAL
FEE

X \$ _____ =	
X \$ _____ =	
+ \$ _____ =	
TOTAL ADD'L FEE	

RATE
ADDITIONAL
FEE

X \$ _____ =	
X \$ _____ =	
+ \$ _____ =	
TOTAL ADD'L FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.